



**DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services**

**James Randolph Farris, M.D.
Regional Administrator**

1301 Young Street, Room 714
Dallas, Texas 75202
Phone (214) 767-6427
Fax (214) 767-6400

July 11, 2001

Our Reference:WA-NM0173.90.R1.02

Mr. Robert T. Maruca, Director
Medical Assistance Division
State of New Mexico
Human Services Department
Post Office Box 2348
Santa Fe, New Mexico 87504-2348

Dear Mr. Maruca:

I am pleased to inform you that your amendment request for the New Mexico Home and Community-Based Services Waiver (HCBSW) No. 0173.90.R1 has been approved effective July 1, 2000. This HCBSW program, as authorized under the provisions of section 1915 (c) of the Social Security Act, provides an array of home and community-based services as an alternative to institutionalization in an Intermediate Care Facility for the Mentally Retarded (ICF/MR). This amendment has been assigned control number 0173.90.R1.02 which should be used in all future correspondence.

Specifically, the amendment changes the waiver cost calculation methodology to more accurately reflect Factors "D" and "G" for year five of the waiver.

The following estimates of utilization and cost have been approved:

| Year | Unduplicated Recipients | Factor "D" |
|------|-------------------------|------------|
| 5 | 2900 | \$67,293 |

For your convenience, a copy of the approved amendment is included with this correspondence. If you have any questions, please contact Cheryl Rupley at 214-767-6278.

Sincerely,

James Randolph Farris, M.D.
Regional Administrator

Enclosure

cc: Director, Center for Medicaid and State Operations

bcc: Original and Reading Files

**FILE
COPY**

| Office | Surname | Date | Office | Surname | Date | Office | Surname | Date |
|--------|---------|------|--------|---------|------|--------|---------|------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |